

L24000033508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

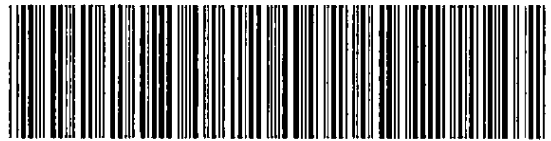
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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J. HORNE  
JUL 17 2024

Office Use Only



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2024 JUL 2 10:18:19

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** E + J Diana Transport LLC  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Joel Diana Garcia  
(Contact Person)

E + J Diana Transport LLC - 5318 Royal Birt Ave  
(Firm/Company) Kissimmee, FL 34746

1633 E Vine St #200  
(Address)

Kissimmee FL 34744  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joel Diana Garcia at ( 321 ) 482-3164  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2021 JUN 23 10:19

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: E + J Diana Transport LLC.

2. The Florida document/registration number assigned to this limited liability company is:

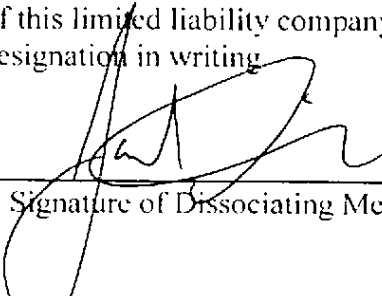
L 24000033508.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/20/2024

4. I, Joel Diana Garcia, hereby withdraw/resign as a  
(Print Name of Person Resigning)

VP-MNG  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)